

Information for you

RECORD KEEPING FOR LIFE

Vital Records and Information in One Place



Simplifying the details

When death occurs, surviving family members must immediately handle a number of important matters. You can use this brochure to keep your family's vital records and information in one place.

Complete the following information as fully and accurately as possible. Then give copies to your family and trusted advisers to store in a secure location. The accuracy of the information is essential to handling these matters smoothly. Remember to periodically review and update this information and keep a copy in a safe place, such as a safe deposit box or a fireproof, waterproof home safe or filing cabinet.

Personal information

Name: _____

Date of birth: _____

Place of birth: _____

Date of death: _____

Place of death: _____

Death certificate number: _____

Social Security number: _____

Military service number: _____

Veterans Adm. claims number: _____

Life and health insurance policies

Company	Policy number
_____	_____
_____	_____
_____	_____

Beneficiary(s) information

Name	Policy number
_____	_____
_____	_____
_____	_____

TROXELL



Everything Insurance Should Be®

Names, addresses and birthdates of dependents

Location of important items

Safe deposit box: _____
Safe deposit box key: _____
Funeral instructions: _____

Place of interment: _____
Deed to cemetery plot: _____
Will: _____
Trust agreement: _____
Death certificate: _____
Birth certificate: _____
Marriage certificate: _____
Divorce records: _____
Insurance policies: _____
Naturalization papers: _____
Adoption papers: _____
Mortgages, deeds: _____
Credit union records: _____
Social Security card: _____
Military service records: _____
Civil service employment records: _____
Securities, stocks and bonds: _____

Automobile titles, registrations: _____

Business agreements: _____

Notes payable: _____

Notes receivable: _____

Other loan papers: _____

Tax returns for prior years: _____

Credit cards: _____

Important correspondence: _____

Names, addresses and phone numbers of advisers

Life insurance agent: _____

Clergy: _____

Funeral director: _____

Executor or administrator: _____

Attorney: _____

Accountant: _____

Trust officer: _____

Investment broker: _____

Auto, home insurance agent: _____

Others: _____

Other sources of benefits
Employer: _____

Union officer: _____

Fraternal organization: _____

Credit life insurance: _____

This is not a policy. For a complete statement of the coverages and exclusions, please see the policy contract. All applicants are subject to underwriting approval. Products available in most states.

Do not reproduce or post online, in whole or in part, without written permission. © 2019 The Cincinnati Life Insurance Company. 6200 S. Gilmore Road, Fair field, OH 45014-5141.

